

INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (11-07)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
ENVIRONMENTAL STEWARDSHIP PROGRAM

Indiana Department of Environmental Management
Office of Pollution Prevention and Technical Assistance
100 North Senate Avenue IGCS W041
Indianapolis, IN 46204-2261
Telephone: (800) 988-7901
FAX: (317) 233-5827
E-mail: eap@idam.IN.gov

When to use this annual report form...

STOPI Is your facility a member of the U.S. Environmental Protection Agency's National Environmental Performance Track and Indiana Environmental Stewardship Program? If so, please use the U.S. EPA National Environmental Performance Track Annual Performance Report form available at http://www.epa.gov/performancetrack/program/report.htm. The U.S. EPA will notify IDEM after receiving your annual performance report.

GOI Please use this annual report form if you ere <u>univ</u> a member of the Indiana Environmental Stewardship Program and <u>not</u> a member of the National Environmental Performance Track. Your Annual Performance Report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, fax, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP Program Manager at 800-988-7901.

The indiana Environmental Stewardship Program (ESP) Annual Performance Report should demonstrate programs toward objectives and targets AND certify ESP requirements continue to be achieved. The Annual Performance Report should cover the twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system sudit was conducted by your facility. <u>Indiana ESP facilities must submit an Annual Performance Report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.</u>

Please do not include any confidential business information in your Annual Performance Report. Public access laws require IDEM to make the Annual Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.

SECTION A FACILITY INFORMATION
Name of Facility
Wabash National, L.P.
Name of Parent Company (If applicable)
Street Address (number and street)
1000 Sagamore Parkway South
City/State/ZIP Code
Lafayette, IN 47905
Facility/Company Web site
www.wabashnational.com
CONTACTINI ORWATION
Contact Name (Mr./Mrs./Ms./Dr.)
Mr. Andrew Frisbie
Title
Senior Environmental, Health, and Safety Engineer
Telephone number
(765) 771-5443
FAX number
(765) 446-5755
E-mail address
afrisbie@wabashnational.com
Mailing Address (if different from facility address)
P.O. Box 6129 City/State/ZiP Code
Lafayette, IN 47903 Reporting Period Dates
Jan, 1, 2008 - December 31, 2008
If this is your third Annual Performance Report, do you wish to renew your indiana Environmental Stewardship Program membership?
Yeaif yes, please complete all sections of this annual report.
□ NoIf no, you can skip Section D of this annual report.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities? If so, please list them in the space below. □ Yes ☑ No
•

	IAL MANAGE	MENT SYST	EM ASSESSMENT		
Why do we need this information? 4DLW needs in amortion on the performance and assessment			: Погазат жили а	What do you need to do? and cyon for high 1968 assersaments.	
activities of your Linvironmental Management System (LMS) 1. Is your facility currently registered to a recognized third-p.	adu EMO			Alberti additional cheete as processary	
 Is your facility currently registered to a recognized third-postandard? Yes 	ацу смэ	Year:	2008		
a. If yes, when was an EMS audit or other assess		Тура:	ISO 14001:2004 R	ecertification Audit	
conducted by an independent third party at you Placae provide the type (e.g., ISO 14001 certifi		Scope:	Lafayette Operation	ons	
scope, and <i>month</i> of the last assessment.	,,	Month:	May		
 b. If no, when was an internal or corporate EMS a 		V			
conducted at your facility? Please provide the month of the leat segesament.	scope and	Year: Scope:			
		Month:			
2. When did your facility last conduct an internal or corporat	ė.	Year:	2008		
compliance audit? Please provide the scope and manth(audit, and indicate who conducted the audit(s) (e.g., facili		Scope:	Lafayette Operation	nns	
corporate groups, third party). Do not include audits, insp		Month(s):	December	7110	
site visits by regulatory organizations.		Who:	Facility Staff		
3. (Optional) Please describe any other audite that were con	rducted at	Internal			
your facility. 4. Has your facility corrected all instances of potential non-c	omoliance	Compat			
and EMS non-conformance identified during your audite a		1	-	ctions were issued for items	
assessments? ⊠ Yes			out of internal and e	nging management review	
 a. If yes, briefly summarize corrective actions take 	an and other	-		~ ~ ~	
improvements made as a result of your EMS assessment(a) or compliance audit(s).		i	-	re key individuals from	
• • • • • • • • • • • • • • • • • • • •	. :			driving changes. Also	
☐ No b. If no, please explain your plans to correct these	instances.	I .	ig incorporating mo	-	
☐ No such instances identified.	~	mprove	ments withing the I	31415.	
 Explain the emergencies experienced within the facility do past year. Were the applicable emergency and continger 				dical emergencles during	
detailed in the EMS effective? What changes, if any, hav		2008. Plan was effective. Updated the			
made to your facility's emergency or contingency plans?			emergency coordinators due to change in		
		person	nel.		
6. When was the last Senior Management review of your Ell completed?	V18		r: 12/2008		
क्रम्पर राष्ट्रण स्थापना द		[Title: Brent Yeagy, VP of	
		· · · · · · · · · · · · · · · · · · ·	cturing, Lafayette O	perations	
 When did your facility last conduct a systematic identificat review of your environmental aspects? 	tion or	Month/Yea	:: 03/200 9		
10. (Optional) Please provide a narrative summary of progres		Environme	ntal Aspect	Progress Made This Year	
toward EMS objectives and targets other than those report Environmental Performance Initiative In the following sect				(e.g., quantitative or qualitative improvements, activities conducted)	
may limit the summary to environmental aspects that are	significant	Energy	Reduction	Procedures were being	
and towards which progress has been made during the la year. Attach additional sheets as necessary.	iac calandar	Lines By	. www.www.a.	developed for shutdown,	
	yndi. Attautt audittoliai siiddus ad tioccoddi y.			focused efforts on	
				reducing peak demand.	
			duction/recycling	Indentifying additional	
			ATTE	opportunities for recycling	
				plastics and cardboard.	
	ķ			prastics and cardovard.	
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Market		l			

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⊴SECTION C	ENVIRONMENTAL	IMPROVEMENT INITIATIVE	RL501.18	
Why do we need this information Facilities need to also the usual co		À	. In all Marines Aut I a	What do you need to do?
вириментенти извание быт was pur-		i žpedoimance d	er the following table to summan. Escompared to your 1437 environ	ageurgranda oksinent mirapos. Bi kon, parriikka sankabutusatal
Category: Waste		*	•	
Aspect: Non-regulated was		sal		<u>'-</u>
Specific information on Aspect (opti	nai):	Oragrasa durbar vaca		1
	Baseline	Progress during year 2008	Environmental Improvement Initiative Goal	Cost Savings (if applicable)
Actual Quantity (per year)	8100	2516	6100	\$73,900
Messurement Unit	tons	tons	tons	
Normalized Quantity (per year)	8100	4500	6100	
Basis for your Normalizing Factor (e.g., gallons of paint produced)	trallers produced	trailers produced	trailers produced	
Briefly describe how you achieved in		, if relevant, any circumstance		<u></u>
Improvements were ach	ieve though training	, segragation of mate	erials, and a partnersh	ip with recycling
company.		,		
Please liet any state, EPA, or other	partnership programs to which	you are reporting this data (e.)	g., Energy Ster, Project XL).	
NA		<u> </u>		

(Optional) if your facility has experie those results here.	nced continued results for env	ironmental improvement initiat	IVES pursued in past years of ES	P membership, please share
NA		•		
		c		
		*		
SECTION D	FNVIRO	NIVENTAL IMPROVEMENT I	NITIATIVES	
Why do we need this information			El.,	What do you need to do? What do you need to do?
audibus need to demenstrati er anproving environneotal periomea			EWORR 1818 AS E. 112	и онивелите в са кинитивает избиба
For ESP membership, you must ide the application and the remaining wi	ntify three (3) environmental in	iprovement initiatives for each	3-year membership term. One (1) initiative was identified in
questions. Choose an indicator from	n the Environmental Performar	ice Indicator Table to measure	the identified environmental initi	ative. The Environmental
Performance Indicator Table is proveled for your initiative should be re	ided with the ESP Application :	and is also available at http://w rets in your EMS - Where nose	ww.in.gov/idem/prevention/esp/t tible, indicators should also be id:	able.doc. The indicator you antified as having a significant
environmental impact in your EMS.	No more than two of your indi-	cators can be from the same a	nvironmental category during the	3-veer term. If you are not
eure how your objectives and terget IDEM at 800-988-7901.	s fit into the indicators from the	Environmental Performance I	ndicator Table or whether your in	dicators are significant, call
	ta a a a a a a a a a a a a a a a a a a	ental heliadarnan calantal fr	ane ika Chilipanganini Maniengan	an kadisatau Tahla Addiblanal
Please complete the following quest information is required for air, hazan	ione weste, solid waste, and s	nergy indicators as requested in	in Appendix 1.	co indicator rabio. Additional
1a What category have you selected				missions for Total GHGs.
please turn to Appendix 1 to co				,
•	•			6
16 What indicator have you selected	from the Environmental Perfo	irmança Table? NOR-Naza	ardous waste generati	an, proken down by
management method		 P		
10 All measurements should represent focus your initiative on a specific	subset of the indicator (e.g., a	specific material, process, VO	C, group of toxic air amissions, d	r particular
waste component). Does your in substance, or component (e.g.,	itiative include everything cove	ared by the indicator (e.g., all $oldsymbol{arphi}$	OCs, all non-hazardous waste),	or a specific process,
□ Ali	MIIMIIA) AKIANAKIAŠI	Ž.		
Specific				
If your initiative is specific to a a waste component). Cardbox			your indicator (e.g., specific chem	ilca) to be reduced, specific

1d What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)? employee training, segragation of materials, and partnership with recycling company.

2e Does this Initiative address a significant aspect in your EMS?
☐ Yes
☒ No

25 If no, please explain why you believe this indicator should be in increase recycling.	cluded as an environmental improvement initiative. Project will reduce waste and
Stopf if the category listed in Question 1s is Energy Use, Waste, to complete the questions pertaining to the category you listed regarding your facility's environmental improvement initiative.	or Air Emissions for Total GHGs, please skip Questions 3a - 3b below and turn to Appendix 1 I. After completing Appendix 1, return to question 4 and complete the remaining questions
3a What units are you using to quantify this indicator? TOILS (Please refer to the Environmental Performance Indicator Table	o for the acceptable units for each indicator.)
3b List the baseline annual quantity of the indicator and the annual	
Beseline quantity 2,516	Year 2008
Future year quantity (not including production) 2,266	Year 2009
4 Does the quantity presented in the future quantity column repres Normalized goal (i.e., indexed to level of business in base Absolute goal (i.e., demonstrates improvement even if pro	oline year)
Please briefly describe your basis for normalizing. Examples of	evide normalizing factors and normalized quantities in your annual performance reports, potential normalizing basis include: gallons of paint produced, square feet of circuit boards ion, or number of employees (for R&D and administrative sites only).
6a Are you subject to Federal, State, tribal, or local regulatory requ ☐ Yes ☑ No	elrements for this indicator?
66 If yes, explain how your initiative exceeds regulatory requirems	nts.
).
SECTION F PUBLIC C Why do we need this information?	PARTACH AND 1° BEGNANDER PORTIN BORDAND BEGNAND TO CHARGE STATES. Solved begin very do both.
IDER needs to know how convicting and a unformation was shared with the politic	Here table in the day that the aby the share did not place to the state of mineral and place to the state of mineral and place to the state of mineral and the state of mineral and the state of the sta
Please briefly describe the activities that your facility conducted du report publicly on its environmental performance. Feel free, but no	ring this reporting period to interact with the community on environmental issues and to to obligated, to attach supporting materials (e.g., meeting agendas, public announcements). Der of Commerce, our award ceremony along with newspaper
Please indicate which of the following methods your facility plans to many as appropriate.	ouse to make its ESP Annual Performance Report available to the public. Please check as
☐ Website (http://www.)	: a
□ Ореп Нацав	
⊠ Meetings	
☐ Press Releases	
☐ Community Advisory Panel	
☑ other Our performance on environmental initivarious seminars and presentations, and our	tiatives is presented to our employees, the community via customers.
Why do we need thes information? This information will help 113 M to effect vely noneige the	DDITIONALIBNI ORMATION What do you need to do? Atemor the questioner as completely as provible.
In eddition to ESP, please list environmental awards receinformation about each particular program). NA	lived or voluntary programs participated in during the past twelve months (include
consider,	If so, please describe the implementation process and list additional benefits IDEM should urrent incentives only required requesting the incentive.
res. implementation for majority of cl	an entraceunaca ornà redunen reducatilià file lirellitàs.

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Additional incentives requested will require a permit modification. We would like to request the previous incentive on monthly volume-weighted averaging instead of daily averaging of all coatings applied, but we understand that it has not been approved by EPA and may not be possible.

If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration? Previously registered to ISO 14001.

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- Explain the measured or perceived results from receiving, documenting, and responding to external communication. The results have been a consistency on our response to requests and a better perception in the community.
- How have community residents and businesses reacted to your facility participating in the Indiana Environmental Stewardship Program? We have had a very positive response including have several requests to discuss the program and how we became a member.
- According to the measurement program developed and implamented by your facility to measure Environmental Management System success, is your facility's EMS successful? Why or why not? If not, what changes will be made to ansure continual environmental improvement and future EMS

We believe it has been a success. This is based upon the results we have achieved including becoming an ESP member, objectives and targets completed, and the perception from the community, our customers, and our associates.

CERTIFICATION AND PLEDGE

On behalf of Wabash National, L.P. (name of facility),

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, Wabash National, commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local Jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal antity whose facility is submitting this Annual Performance Report,

Signature

Title VP of Manufacturing, Lafayette Operations

Date (month, day, year) March 31, 2009

Please mail, fax, of e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00 IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@ldem.lN.gov

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APPI NDIX 1

ENVIRONMENTAL PERFORMANCE DATA

Additional questions for environmental improvement para laves for the following calegor estimateurs.

Energy Use - Non-Transportation
In the table below, please enter the amount of energy that you currently use and that you intend to use in your future reporting year. Break the energy use
down by fuel type. Please note that you need only complete those lines that are relevant to your facility. If all of your energy is purchased from a local
electricity generator, you may only need to complete the first line. If the facility uses natural gas, please be sure to complete the appropriate line (natural gas is typically combusted on site so it is listed in the "onsite" section).
Please note that this table categorizes sources of energy according to where the energy is generated.

3a is the goal of your energy use commitment to:

Reduce total energy use
Invest in renewable energy sources
Combination of both stretegies 35 How much energy of each type does your facility use?

		Baseline Year 2008	Future Year 20	Units
Energy	Electricity	¥ :		
Generated	Steam			
Off-Site	Total Energy Generated Off-Site			
******	Coal			·
	Natural Gas			,
	Crude Oil	<u> </u>		
	Fuel Oil	······································		**************************************
	Diesel	· · · · ·		
	Propane / LPG			
	Gasolina			1034121
Sources of	Hydrogen Powered Fuel Cells			
Energy Generated	Natural Gae / Methane Powered Fuel Cells			
On-Site	Biomass			
	Soler			
	Wind			
	Lendfil Ges			
	Geothermal	· · · · · · · · · · · · · · · · · · ·		
	Hydroelectric	. <u>.</u> .,		
	Tire Derived Fuel			
	Other Fuel or Source Specify:	<u> </u>		
	Total Energy Generated On-Site			
Total Renew	zebie Energy Use			
Total Non-R	enewable Energy Use	4		
Total Energy	v Use	· · · · · · · · · · · · · · · · · · ·		
Metria Tons	of CO2 Equivalents of CO2 Equivalents			
Metric Tons	of CO2 Equivalents			
Offset 1	Fhrough Purchases of Electricity rable Off-Site Sources	va va		
from Renew	rable Off-Site Sources	2		
Nut Metric T	ons of CO2 Equivalents	8		

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he tab ounte duct n	Non-Hezardous Waste Generation ole below, please enter your facility's an you manage currently end that you into nor product packeging. e goal of your non-hazardous waste co Reduce non-hazardous waste Improve waste management methods		vn by waste management method. r. "Waste" is defined as all material	Please enter both the s sent off-site that are nelt
How:	Combination of both strategies much of your waste is handled using ea			
	Method of Waste Managed	Baseline Year 2008	Future Year 2009	Units
	Landfill	2,516	2,266	tons
 				1
	Incineration	0 %	0	tons
	Incineration Reused/recycled off-site		3,414	tons tons
		3,164	, , , , , , , , , , , , , , , , , , ,	
ete - i he tet ; you i	Reused/recycled off-eite Other management - Specify: Total Non-Hazardous Waste Hezardous Waste Generation bie below, please enter your facility's ar manage currently and that you intend to	3,164 0 5,680 nount of hazardous waste, brokeri down to manage in your future reporting year. In	3,414 0 5680	tons tons tons
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ste - i	Reused/recycled off-eite Other management - Specify: Total Non-Hazardous Waste Hazardous Waste Generation ble below, please enter your facility's ar manage currently and that you intend to e goal of your hazardous waste commit Reduce hazardous waste improve waste management methodi Combination of both strategies	3,164 0 5,680 nount of hazardous waste, broken down to manage in your future reporting year. In the ment to:	3,414 0 5680	tons tons tons
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ite - le tel your la th	Reused/recycled off-eite Other management - Specify: Total Non-Hazardous Waste Hazardous Waste Generation bie below, please enter your facility's ar manage currently and that you intend to e goal of your hazardous waste commit Reduce hazardous waste improve waste management methods Combination of both strategies much of your hazardous weste is hand Method of Waste Managed Landfill Incineration	3,164 0 5,680 nount of hazardous waste, broken down to manage in your future reporting year. In the management to: It is a second of the sec	3,414 0 5680 y waste management method. Pleadude all hazardous waste that is tre	tons tons tons tons se enter both the amount ated on-site or sent off-sit
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aste - les table your la third	Reused/recycled off-eite Other management - Specify: Total Non-Hazardous Waste Hezardous Waste Generation ble below, please enter your facility's ar manage currently and that you intend to e goal of your hazardous waste commit Reduce hazardous waste improve waste management methods Combination of both strategies much of your hazardous weste is hand Method of Waste Managed Landfill Incineration Reused/recycled off-site	3,164 0 5,680 nount of hazardous waste, broken down to manage in your future reporting year. In the management to: It is a second of the sec	3,414 0 5680 y waste management method. Pleadude all hazardous waste that is tre	tons tons tons tons se enter both the amount ated on-site or sent off-sit

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Älr	Emissions Total GHGs			
30	is the goal of your Total GHGs commitment to:	•		
	Reduce energy use	•		
	Reduce process-related emissions			
	Combination of both strategles	***		
	- ···			
3h	How much preenhouse cas does your facility emit from each source?			

	Source	Baseline Year 20	Future Year 20	Unite
	Stationary Combustion			
	Mobile Sources			
	Refrigeration/AC Equipment Use			
Direct	Process/Fugitive Specify Source:			
Emissions	Process/Fugitive Specify Source:			
	Process/Fugitive Specify Source:	5		
	Total Direct Emissions Process/Fugitive			
	Purchased Electricity	<u> </u>		
Indirect	Purchased Steam			
Emissions	Purchased Hot Water			
	Total Indirect Emissions			
0-441	Other Specify Source:			
Optional Indirect	Other Specify Source:			
Emissions	Other Specify Source: Total Optional Indirect Emissions			
	Offsets			
	Specify Source:			
	Offsets Specify Source:			
Offsets	Offsets Specify Source:			
	Total Reductions from Offsets			
	Total Emissions Leas Offsets			
	Total CFC Total HCFC			-
Supplemental	Total Stationary Combustion –			
Information	Total Mobile Sources - Biomass CO2			
	Electricity trading transactions- Electricity Purchase for Resale			